ENTRY BLANK

PLEASE TYPE OR PRINT

Ms.

X Mr. Artist Mark L. Hornvak

(Last Name Last)

Permanent

463 East 288th, Willowick, Ohio Address Street

44094

Daytime Tel. (

Zip

Area Code

Temporary or

Studio Address

City

Area Code

Daytime Tel. ()

Zip

Street

If you do not presently live in one of the counties of the Western Reserve, in which county were you born?

Collaborator

(If Any)

If May Show entries are not accepted or not sold:

Artist will pick up at Museum.

Museum should dispose of.

☐ Museum should ship to artist at artist's expense

to this address:

Special Instructions

When necessary include below instructions or a drawing of how the object is to be assembled and displayed.

This Entry Blank must be fully made out and signed. Unsigned Entry Blanks will not be accepted.

Note carefully calendar for delivery and return of objects. It is understood that the Museum will have the right to dispose for its own account any objects not called for by the dates listed.

It is also understood that accepted objects will remain on exhibition until July 21, 1985.

The submission of objects will be construed as an acceptance by the artist of all terms and conditions printed in the **Entry Information**

DO NOT DETACH

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	Materials Acryl	ic, ename	BILLIE	12		
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DE.	Materials Acrylic, epamel, Prismacolor					
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1985 MAY SHOW The Cleveland Museum of Art Cleveland, Ohio 44106

Mark L. Hornyak	
Name	
463 East 288th	
Address	
Willowick, Ohio	44094
City & State	Zip

This is your only receipt to claim your object(s).

4	1. Paintings	☐ 2. Graphics	☐ 3. Photography
	☐ 4. Sculpture		

Title three dreams before waking #3

DO NOT WRITE IN THIS SECTION	ACCEPTED	REJECTED
193(1)		X

2	1. Paintings	☐ 2. Graphics	☐ 3. Photography
6	☐ 4. Sculpture	☐ 5. Crafts	

Title watch over birth #2 / genesis III

DO NOT WRITE IN THIS SECTION	ACCEPTED	REJECTED
194 (1)	X	

RETURN OF OBJECTS: REJECTED: JUNE 4-8 ACCEPTED: JULY 29-AUGUST 3

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